Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

PATENT APPLICATION FEE DETERMINATION RECOIL								Α	Application or Docket Number				1
								D O					
<u> </u>		Effec	tive Octob	per 1, 20	03				268:1-	310	74-901	CZZAU	10
CLAIMS AS FILED - PART I (Column 1) (Column 2)								LE	YTITM	OR	OTHER SMALL		
TO	TAL CLAIMS		21				RAT	Έ	FEE	1	RATE	FEE	12
FOR .			NUMBER	FILED .	NUME	NUMBER EXTRA		FEE	385.00	OR	BASIC FEE	770.00	12
TOTAL CHARGEABLE CLAIMS			Z minus 20=		• j		XS :	9=		OR		18	Q:
INE	EPENDENT C	LAIMS	4 minus 3 =		* /		X43	X43=		OR	You	86	1
MU	LTIPLE DEPE	NDENT CLAIM P	RESENT	•			114	+145=		OR	+290=	00	1
* If	the difference	in column 1 is	less than z	ero, enter	"0" in c	column 2	TOT			J	TOTAL	874	1
	c	LAIMS AS A	MENDE) - PAR1	ГП					.	OTHER		1
		(Column 1)		(Colum	n 2)	(Column 3)	SMA	LL	ENTITY	OR	SMALL	ENTITY	J
AMENDMENT A	1/10/06	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ADME	Total	. 25	Minus	- 21	/	= 4	X\$ 9)=		OR	X\$18=	2000	
AME	Independent	5	Minus	*** 4		= /	X43	=		OR	X86=	1800	1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145	=		OR	+290=		
								TAL		\'	TOTAL	3000	
		(Column 1)		(Colum	n 2)	(Column 3)	ADDIT. I	FEE		,	ADDIT. FEE	70	1.
		CLAIMS		HIGHE	ST				ADDI-			ADDI-	ĺ
AMENDMENT B		REMAINING AFTER		PREVIO		PRESENT EXTRA	RAT	E	TIONAL		RATE	TIONAL	
		AMENDMENT		PAID F	OR		<u> </u>	_	FEE			FEE	
Š	Total	*	Minus	**		=	X\$ 9	= .		OR	X\$18=		
AME.	Independent	•	Minus	***		=	X43			OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-				
		•					+145			OR	+290=		
				•		•	ADDIT. F	EE	•	OR	TOTAL ADDIT. FEE		1
	_	(Column 1)		(Colum		(Column 3)							
ENTC	`	CLAIMS REMAINING		HIGHE NUMB	ER	PRESENT			ADDI-			ADDI-	
		AFTER : AMENDMENT		PREVIO PAID F		EXTRA	RATE	-	TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT	Total	•	Minus	**	:	= .	X\$.9	. 1		OR	X\$18=		
	independent	•	Minus	s ank		=	X43-	1			X86=		1
	FIRST PRESE	NTATION OF ML	JLTIPLE DEF	PENDENT	CLAIM		-	7		OR			l
		ma 1 in lace there #	o onto in ort.	ma 92- 1	100 in no		+145			OR	+290=		
	the enterior * ·	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20. ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
1	the 'Highest Nu	nber Previously Pa	id For IN THI	S SPACE is	less than	20. enter "20."	ADDIT. F			OR ,	TOTAL ODIT. FEE		